

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		2	12/28/00
FORMALITY REVIEW	She	827	01-11-01
RESPONSE FORMALITY REVIEW	Request	925	06-04-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	8/24/03
2	8/24/03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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